


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 30, 2006 8:00 am
Secretary of State

01-30-2006 90059 038 ***150.00

DOCUMENT # P03000142166 1. Entity Name R KELLEY POOL SERVICE INC	
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Principal Place of Business 1800 47TH AVENUE VERO BEACH, FL 32966 US	Mailing Address PO BOX 690504 VERO BEACH, FL 32969 US
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01252006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-0479277	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent KELLEY, RICHARD J 1800 47TH AVE VERO BEACH, FL 32966

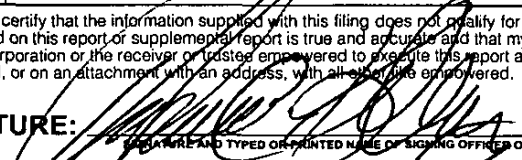
**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P KELLEY, RICHARD J 1800 47TH AVE VERO BEACH, FL 32966
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP KELLEY, ROBIN T 1800 47TH AVE VERO BEACH, FL 32966
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SECR KELLEY, RICHARD J 1800 47TH AVE VERO BEACH, FL 32966
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TREA KELLEY, RICHARD J 1800 47TH AVE VERO BEACH, FL 32966
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	
SIGNATURE:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	1/25/06 772-473-8778 <small>Date Daytime Phone #</small>